


VERIFICATION OF CALIBRATION REPORT

Of Data Master cdm Breath Test Instrument

State of Alaska

Scientific Crime Detection Laboratory - Statedwide Breath Alcohol Program

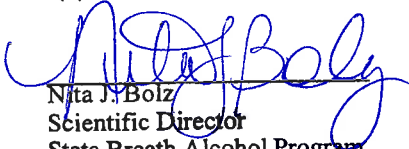
MAY 23 2011

Supervisor/Operator Performing the Verification Procedure:		DataMaster cdm S/N	130569
A	Name	Mac Burrell	ID # 4756 Date 5/18/2011
	Agency	Cordova Police Department	Phone # 424-6100
	Instrument Location	Cordova Police Department	
B	Alco S/N	65859	Target Value 0.081 High Pressure 800
	Alco Test Value Average	0.081	0.081
		1st Alco	2nd Alco
	Signature		
(OVER)			


(Do Not write in the area below)

I, Nita J. Bolz, after being first duly sworn, depose and state as follows:

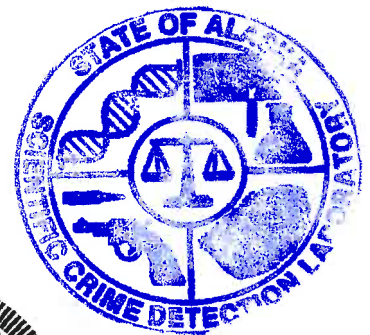
- (1) I am a Forensic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory.
- (2) The Alaska Scientific Crime Detection Laboratory is an entity within the Department of Public Safety.
- (3) I am the Scientific Director of the State Breath Alcohol Program.
- (4) In that capacity, I am responsible for overseeing the breath alcohol program, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program.
- (5) The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the verification.
- (6) The referenced instrument is certified for evidentiary use in the State of Alaska.


Nita J. Bolz
Scientific Director
State Breath Alcohol Program

Subscribed and sworn before me this 15 day of JUNE, 2011.


Daniel L. Nicholas
Notary Public, State of Alaska
Commission Expires with Office

(Notary Seal Stamp)



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DataMaster cdm S/N

130569

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C

TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

NONDRINKING SUBJECT TEST

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130569

MAY 18, 2011

OPERATOR'S NAME:

BURRELL/M

OPERATOR'S NUMBER: 4756

SUBJECT'S LAST NAME:

VERIFICATION OF CAL

SUBJECT'S FIRST NAME/MI :

A

O.L. #: 051811

DEPT/AGENCY: CDV1

CASE/REPORT: 051811

TEST TYPE: V

ALCO TARGET VALUE: .001

ALCO S/N: 65859

--- BREATH ANALYSIS ---

.001 ADJUSTED FOR 30.04 in

ALCO TARGET .001 07:46

BLANK TEST .000 07:47

INTERNAL STANDARD VERIFIED 07:47

ALCO TV 30.04 in .001 07:48

BLANK TEST .000 07:49

SUBJECT SAMPLE .000 07:50

BLANK TEST .000 07:50

ALCO TV 30.04 in .001 07:51

BLANK TEST .000 07:52

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130569

MAY 18, 2011

TIME 07:43

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM: OKAY

SOFTWARE DATE: 02/20/01

HEATERS

SAMPLE CHAMBER: 49c

BREATH TUBE: 43c

BAROMETER: 30.04 in

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

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H I J K L M N O P Q R S T U V W X Y Z I \ ^ _ ` a b c d e f g h i j k l m n o

p q r s t u v w x y z { } ~